

SCC eFile	2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	213529998			
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: Energy EMS Services Co. (USED IN VA. BY: ENERGYMANAGEMENT AND SERVICES COMPANY) </p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA </p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY </p> <p>4.) STATE OR COUNTRY OF INCORPORATION: KY </p> </div> <div style="width: 35%;"> <p>DUE DATE: 6/30/2013</p> <p>SCC ID NO: F1342254</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	
CLASS	AUTHORIZED				
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 109 FIELDVIEW DRIVE PO BOX 1007</p> <p style="text-align: center;">CITY/ST/ZIP: VERSAILLES, KY 40383</p>					
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 55%; vertical-align: top;"> NAME: MARY SMITH TITLE: VP ADMIN/S ADDRESS: 109 FIELDVIEW DRIVE CITY/ST/ZIP/CO: VERSAILLES, KY 40383 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 35%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: MARY SMITH TITLE: VP ADMIN/S ADDRESS: 109 FIELDVIEW DRIVE CITY/ST/ZIP/CO: VERSAILLES, KY 40383	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 55%; vertical-align: top;"> NAME: Wiley Hatcher TITLE: CEO ADDRESS: 3100 S. Gessner Suite 400 CITY/ST/ZIP/CO: Houston, TX 77063 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 35%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: Wiley Hatcher TITLE: CEO ADDRESS: 3100 S. Gessner Suite 400 CITY/ST/ZIP/CO: Houston, TX 77063	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME:	Scott Cutlip	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	109 Fieldview Dr.		
CITY/ST/ZIP/CO:	Versailles, KY 40383		
NAME:	Joel Huber	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	109 Fieldview Dr.		
CITY/ST/ZIP/CO:	Versailles, KY 40383		
NAME:	Gary Greer	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	3100 S. Gessner Suite 400		
CITY/ST/ZIP/CO:	Houston, TX 77063		
NAME:	Alice Weekley	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	3100 S. Gessner Suite 400		
CITY/ST/ZIP/CO:	Houston, TX 77063		
NAME:	Mike Lane	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	3100 S. Gessner Suite 400		
CITY/ST/ZIP/CO:	Houston, TX 77063		
NAME:	Kimberley Braswell	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	3100 S. Gessner Suite 400		
CITY/ST/ZIP/CO:	Houston, TX 77063		
NAME:	D. Michael Brady	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	3100 S. Gessner Suite 400		
CITY/ST/ZIP/CO:	Houston, TX 77063		
NAME:	Joc Carpenter	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3100 S. Gessner Suite 400		
CITY/ST/ZIP/CO:	Houston, TX 77063		
NAME:	Don Fogel	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3100 S. Gessner Suite 400		
CITY/ST/ZIP/CO:	Houston, TX 77063		
NAME:	Tom Petrosewicz	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3100 S. Gessner Suite 400		
CITY/ST/ZIP/CO:	Houston, TX 77063		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ MARY SMITH	MARY SMITH, VP ADMIN/S	6/26/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.